

WESTERN AVENUE MEDICAL CENTRE
PPG MEETING 7th JUNE 2016

Present:

Mr Brendan Doyle (BD) Chair
Mrs Janet Pitcher (JP)
Mrs Margaret Clarke (MC)
Mrs Barbara Kettell
Jamie Ducker (Practice Manager – JD)

Apologies:

Mrs Christine Dee, Mr Gerald Templeton

1. Minutes from the last meeting

Minutes approved

2. Actions from the previous meeting

- PPG chairs have been contacted and a meeting has been arranged.
- Survey results collated. Agenda item today.
- No further update received from CCG re financial position. BD attended Healthy Blacon meeting where information was shared regarding a consultation on maternity services. JD to investigate.
- Message added to screen in waiting room promoting NHS Choices and option to rate practice.

3. Blacon update

JD informed the group that after much discussion, the practice will not be moving to the new Blacon Parade site. The reasons behind the decision were increased cost which may result in the practice running a reduced service. JD informed the group that the message coming out was that the practice had “withdrawn”, giving the impression that the practice had agreed to move and had pulled out late on in the process, causing disruption to others. The way the message was being delivered was painting the practice in a particularly negative light. JD informed the group that the practice would be writing to CCG giving the history of the project and the reasons behind the decision. BD suggested that the PPG also send a letter supporting the practice’s decision. This was agreed by those attending. BD to draft a letter and share with all PPG members seeking their views before sending.

4. Staff changes

JD informed the group that Dr Wilkinson will be leaving the practice due to a change in her personal circumstances and the need to change her current working pattern. Dr Wilkinson’s last day at the practice will be 22nd August. JD explained that at present the practice will not look to replace like for like. A new Nurse Practitioner has been employed to work on a Friday and a Mental Health Nurse and Psychological Wellbeing Practitioner have also been employed. It is hoped that these changes will address the needs of our patient population and still provide the same level of access. The new practitioners will take up post in July.

5. Analysis of survey results

All results discussed and compared to recent IPSOS Mori survey results where possible.
Improvement in most areas.

Q1: Contact by phone

83% positive compared to IPSOS 71.7%. Group agreed that access is good and has improved but find that lines are busier at 8am. Patient comments for improvement were more phone lines and more reception staff. Not possible to add more staff, and additional lines would require more staff. Practice already improved access by combining 2 numbers into 1 line, and when writing to patients asking them to book routine appointment requesting that they ring after 10 am.

Action: JD to speak to Reception Manager to see whether data input clerk can act as additional person to answer phones when reception staff away from desk carrying out other admin functions and taking lunch.

Q2. Helpful receptionists

97% positive compared to IPSOS 87%. PPG agree that receptionists are very helpful. Feedback from patients was that some receptionists are friendlier than others.

Action: None

Q3. Awareness of online services

76% of patients are aware of online services. Of those that are aware, 16% are registered. Reasons given for not registering are not having a computer, easier to walk over and book, prefer talking to reception. JD explained that patients booking appointments online does improve telephone access for other patients but removes the ability for reception to signpost patients to other services which can improve access to a GP, such as Pharmacy First, Physio First, Mental Health Nurse.

Action: Information and instructions for online services to be included in registration pack.

Q4. Convenience of last appointment

93% positive compared to IPSOS 95.3%. Group agreed that access is very good and improved considerably. Reason given for negative feedback was waiting time to be seen. JD agreed that this was a problem with some clinicians and has been mentioned previously. Notices are displayed in the waiting room explaining that GPs are only allocated 10 minutes per appointment and sometimes this is not enough to deal with complex medical problems so clinics may overrun. Notices also ask patients to speak to reception for an update if they have waited more than 30 minutes. Group say that informing patients if there is a delay would be useful.

Action: JD to see if there is a way of using the display screen in the waiting room to keep patients informed on clinic times.

Q5. Why was appointment not convenient

Reasons given: Wait for sick note, working on appointments that were available, wanted to book 1 week ahead to arrange cover for work. JD explained that as sick notes are non-urgent, specific slots are given for this type of appointment to limit the impact on access for more acute medical issues. Agreed that work seemed to be the main issue with appointments being inconvenient. JD explained that the practice does make appointments available after 6pm for patients who work. The Extended Hours Service is specifically for patients who struggle to attend during normal opening hours, and operates every weekday evening and all weekend.

Action: JD to promote the Extended Hours Service via the display screen and producing leaflet highlighting services available outside of surgery times.

Q6.GP helping to understand decisions about care

88% positive compared to IPSOS 70.3%. Feedback from PPG was that they were happy, and if they don't understand something then they will ask.

Action: None

Q7. Nurse helping to understand decisions about care

78% positive compared to IPSOS 72.3%. Feedback from PPG as above. JD explained that Nursing team has changed recently so responses to this question be reviewed at next patient survey.

Action: Review responses at next survey.

Q8. Recommending the surgery to friends or family

83% positive compared to IPSOS 64.5%. BD fed back to the group about a patient he spoke to who gave very positive feedback but said that she wouldn't recommend the practice as this would increase the number of patients wanting appointments and would reduce her chances of getting one! Group agreed that service has improved over recent times.

Action: None

Q9. Any other changes to improve the service

Common responses: Bigger car park, later appointments for those who work, longer opening hours – evening and weekends, shorter waiting times, entertainment for children

Action: Largely being addressed as a result of feedback to other questions.

Group agreed that these were a very positive set of results. Further survey to be carried out in 6 months.

Date of next meeting: 19th July at 3pm